FORM D

ABB Bection Section

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

Washington, QC

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR TORM LIMITED OFFERING EXEMPTION

5000	14073	, /
OMB APPE	ROVAL	/
OMB Number:	3235-0076	
Expires:	April 30, 2008	
Estimated average	burden hours	
per response	16.00	

SEC USE ONLY

FEB 2 1 2006

THOMSON

FINANCIAL

☐ Estimated

DE

Serial

Prefix

104 UNIF		ON 4(6), AND/ ED OFFERING		TION	D	ATE RECEIVED	
Name of Offering (check if this is an amen	dment and name	has changed, and inc	licate change.)			
Purchase and Sale of Series A Prefe	rred Stock						
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 5	06	☐ Section 4(6)	☐ ULOE	
Type of Filing: 🗵 New Filing 🔲 Ame	ndment						
	A. BASIC I	DENTIFICATION	ON DATA	4			
1. Enter the information requested about the issu	ıer				1 ISSUE SOUR LEW BOWS HOLD	(Ī
Name of Issuer (☐ check if this is an amend	ment and name h	as changed, and indi	cate change.)				
Atomic Brands, Inc.							
Address of Executive Offices	(Number ar	nd Street, City, State	Tele	08024	545		
311 West Superior Street, Suite 315E	3, Chicago IL	60610				: 1	
Address of Principal Business Operations	(Number ar	nd Street, City, State	, Zip Code)	Teleph	one Number (Inclu	ding Area Code)	
(if different from Executive Offices)							
Brief Description of Business				·		***************************************	
Beverage developer					-	100meen	7
Type of Business Organization			 -		Pr	IOOE00E	7
☑ corporation ☐ limited partners	ship, already form	ed 🗆 other (please specify): lim	ited liability compa	my a a coco	

GENERAL INSTRUCTIONS

Actual or Estimated Date of Incorporation or Organization:

□ business trust

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

Month

CN for Canada; FN for other foreign jurisdiction)

1 2

Year

Actual

0 | 6

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

☐ limited partnership, to be formed

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Λ	TT	FI	דוא	ГIС	N

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	A. BASIC IDENTI	FICATION DATA		
 2. Enter the information requested for the fe Each promoter of the issuer, if the issuer Each beneficial owner having the powthe issuer; Each executive officer and director of Each general and managing partner of 	ter has been organized within ver to vote or dispose, or dire corporate issuers and of corp	ct the vote or disposition o		
Check Box(es) that Apply: Promoter	■ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Deubler, Donald L.				
Business or Residence Address (Number and	Street, City, State, Zip Code)		
c/o Atomic Brands, Inc., 311 West	Superior Street, Suite	315B, Chicago IL 606	610	
Check Box(es) that Apply: 🗷 Promoter	■ Beneficial Owner	Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Staats, Shane			,	
Business or Residence Address (Number and	Street, City, State, Zip Code)		
c/o Atomic Brands, Inc., 311 West	Superior Street, Suite	315B, Chicago IL 606	510	
Check Box(es) that Apply: ☐ Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Adams, D. Barth				
Business or Residence Address (Number and	Street, City, State, Zip Code)		
c/o Atomic Brands, Inc., 311 West	Superior Street, Suite	315B, Chicago IL 606	610	
Check Box(es) that Apply: ☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Reiner, Daniel T.				
Business or Residence Address (Number and	Street, City, State, Zip Code)		
3561 Fertile Valley Road, Newport,	WA 99156		,	
Check Box(es) that Apply: ☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Scott, Frank and Yvett		_		····
Business or Residence Address (Number and	• • • • • • • • • • • • • • • • • • • •)		
1077 Amoroso Place, Venice, CA 9	0291			
Check Box(es) that Apply: ☐ Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Bill Cahan & Associates				
Business or Residence Address (Number and)		
171 Second Street, 5th Floor, San I	Francisco, CA 94105			
Check Box(es) that Apply: ☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				•
Lownstein, Andrew				
Business or Residence Address (Number and	Street, City, State, Zip Code)		
4 Cedar Street, Natick, MA 01760				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	A. BASIC IDENTI	FICATION DATA										
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; 												
 Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 												
Check Box(es) that Apply: ☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner								
Full Name (Last name first, if individual)												
Suckling, Andrew			·	·								
Business or Residence Address (Number and												
40 Prince Street, #64, New York Ci	-											
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner								
Full Name (Last name first, if individual)												
Business or Residence Address (Number and	Street, City, State, Zip Code)											
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner								
Full Name (Last name first, if individual)												
Business or Residence Address (Number and	Street, City, State, Zip Code)											
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner								
Full Name (Last name first, if individual)												
Business or Residence Address (Number and	Street, City, State, Zip Code			ı								
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner								
Full Name (Last name first, if individual)		-		,								
Business or Residence Address (Number and	Street, City, State, Zip Code											
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner								
Full Name (Last name first, if individual)												
Business or Residence Address (Number and	Street, City, State, Zip Code			****								
Check Box(es) that Apply: Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner								
Full Name (Last name first, if individual)												
Business or Residence Address (Number and	Street, City, State, Zip Code											

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

									В,	INF	ORM	ATIO	ON AI	BOU	r ofi	ERI	NG								
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?													es	No 🗷										
า													¢		N/A										
۷.	2. What is the minimum investment that will be accepted from any individual?											φ_ \	es	No											
3.	3. Does the offering permit joint ownership of a single unit?											E)													
4.	co If or	mmis a per: state:	sion o son to s, list	or sir be l the n	ition re nilar re isted is ame o ou ma	emune s an as f the b	eration ssocia proker	for a ted pe or de	solicit erson ealer.	ation or age If mo	of pur ent of a re thau	chase a bro a five	ers in o ker or (5) po	conne deale erson	ection or regis s to be	with stered	sales of	of sec the S	curities EC an	s in th id/or v	e offer vith a :	ing. state		,	
Full 1	Vam	e (La	st nan	ie fir	st, if i	ndivid	ual)								·										
						<i>-</i>																	_		
Busin	ess	or Re	siden	ce A	ddress	(Num	ber ar	nd Str	eet, C	ity, Si	ate, Z	ip Co	de)												
Name	of	Asso	ciated	Brol	er or	Dealer							·- <u>-</u>												
States	in '	Whic	h Pers	on L	isted I	las Sc	licite	d or I	ntends	to Sc	olicit P	urcha	asers												
(C	hec	k "Al	1 State	es" o	r checl	k indi	vidual	State	:s)	•••••								•••••		• • • • • • • • • • • • • • • • • • • •	••••••				l States
[AL] [ΑK) (ΑZ] [AR][CA][CO	I	CT][DE] [DC][FL] [GA] [HI] [ID]
	IL][IN) (] [KS		KY				ME][MA		MI][MN] [MS][мо ј
	MT RI][NE] [NV SD		NH][NJ TY) [NM UT) [NY VT][) [][OH WV][OK WI][OR WY][] [PA.] PR.]
					st, if i			JE	17) L	01	J L	V 1	Jι	VA	JI.	W A	11	** *	11	** 1	Jl	** 1	11	- I K J
1 411 1	14111	c (La	3t 11a11	ic iii	st, 11 11	iai via	uaij																		
Busin	ess	or Re	siden	ce A	ddress	(Num	ber ar	nd Str	eet, C	ity, S	ate, Z	ip Co	de)												
Name	of.	Assoc	ciated	Brol	cer or l	Dealei	•																		
States	s in	Whic	h Pers	on L	isted I	las So	licite	d or I	ntends	to Sc	licit P	urcha	asers												
(0	Chec	k "Al	l State	es" o	r chec	k indi	vidual	State	:s)	• • • • • • • • • • • • • • • • • • • •					• • • • • • • • • • • • • • • • • • • •			•••••				••••••		□ Ai	I States
					ΑZ] [•
																									MO]
																									PA] PR]
					st, if in					J L		JL		J L		J.L		J L		, L		1.		J L	
		(1311			.,		,																		
Busin	ess	or Re	siden	ce A	ddress	(Num	ber ar	nd Str	eet, C	ity, S	ate, Z	ip Co	de)												
Name	of	Assoc	ciated	Brol	er or	Dealei																			
					isted I											•		***							
					r checl																				l States
_																									ID]
	IL MT				IA NV][MO] PA]
					NV																				PR 1

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				•
	•		Aggregate	Ame	ount Already
	Type of Security		ffering Price 0	ø	Soļd n
	Debt	\$ <u>_</u>	963,648.18		405,398.68
	Equity	<u>\$</u>	903,046.16	<i>•</i> —	403,336.00
	☐ Common ☑ Preferred*				_
	Convertible Securities (including Warrants)	<u>\$</u>	0	\$	
	Partnership Interests	<u>\$</u>	0	<u>\$_</u>	0
	Other (Specify)	\$	0	\$	0
	Total	\$	963,648.18	s	405,398.68
	Answer also in Appendix, Column 3, if filing under ULOE.				1
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Nun	nber Investors	Do	Aggregate Ilar Amount Purchases
	Accredited Investors		12	S	405,398.68
	Non-accredited Investors		0	<u>\$</u>	0
	Total (for filings under Rule 504 only)		0		. 0
	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		Type of	Do	llar Amount
	Type of offering		Security		Sold
	Rule 505			\$	0
	Regulation A			\$; 0
	Rule 504			\$	0
	Total			\$	0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		x	\$	0
	Printing and Engraving Costs	•••••	×	\$	0
	Legal Fees		X	\$. 0
	Accounting Fees	•••••	×	\$	0
	Engineering Fees		×	\$	0
	Sales Commissions (specify finders' fees separately)		X	\$. 0
	Other Expenses (identify) Blue Sky Filing Fees		X	\$	950.00
	m . 1		x.	\$	950.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

^{*}This filing covers the Series A Preferred Stock and the Common Stock issuable upon conversion of such Preferred Stock.

									,	
	b. Enter the difference between the aggregate off Question I and total expenses furnished in response t the "adjusted gross proceeds to the issuer."	o Part C - Question 4.a. This difference i	is				:	s <u> </u>	62,698. ⁻	18
5.	Indicate below the amount of the adjusted gross proceed for each of the purposes shown. If the amount for an and check the box to the left of the estimate. The adjusted gross proceeds to the issuer set forth in response	y purpose is not known, furnish an estima total of the payments listed must equal the	ite							
	adjusted gross proceeds to the issuer set forth in respon	ise to Part C - Question 4.0 above.		Payme Offic Direct	cers, ors, &			-	ents To	
		_	_	Affil	iates C		_	. Ui	thers	0
	Salaries and fees		E]	\$	Q		R	Ş		0
	Purchase of real estate		×	\$	C	- '	X	Ş		0
	Purchase, rental or leasing and installation of mad	chinery and equipment	K	\$	- 0	- '	X	S		<u> </u>
	Construction or leasing of plant buildings and fac-	ilities	×	\$		- 1	X	s		<u>~</u>
	Acquisition of other businesses (including the val offering that may be used in exchange for the ass pursuant to a merger)	ets or securities of another issuer	×	s	C) -	E	s		0
	Repayment of indebtedness		X	\$) - I	×	s		0
	Working capital		X	\$	0)	K	9	62,698.	18
	• •		=	•	C		<u> </u>	c		0
	Other (specify).			J		_ ,		<i>y</i>		
			ᇤ		C)	F231	_		0
			E	\$		- , \	X	59	62,698.	18
	Column Totals		K	\$	<u> </u>	- !	X (\$ 962,698.		_
	Total Payments Listed (column totals added)			<u> </u>	s			,02,000.		
		. FEDERAL SIGNATURE								
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furniormation furnished by the issuer to any non-accredited i	sh to the U.S. Securities and Exchange Co	om	mission, u	filed und pon writ	er l ten	Rule req	: 505, the juest of i	e follow its staff,	ing the
Iss	uer (Print or Type)	Signature of of		1		D	ate			
	tomic Brands, Inc.	Wowln LIVIM	V	1/-	1	Fe	bru	uary 7	, 20	08
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)		V					:	
De	onald L. Deubler	President and CEO								

D. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

_ ATTENTION _

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)